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DEPARTMENT OF HEALTH AND HUMAN SERVICES

**National Institutes of Health** 

**Proposed collection; comment request** 

"Ethical Dilemmas in Surgery and Utilization of Hospital Ethics Consultation Service: A Survey"

**SUMMARY:** In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the Department of Bioethics, the Clinical Center, the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

PROPOSED COLLECTION: *Title:* Ethical Dilemmas in Surgery and Utilization of Hospital Ethics Consultation Service: A Survey. *Type of Information Collection Request:* NEW. *Need and Use of Information Collection:* This survey is intended to collect information about the ethical dilemmas that surgeons have faced in their practices over the past year, and assess their experiences, if any, with their hospital consultation services. Specifically, the information gathered in this study will be valuable in understanding the ethical dilemmas that surgeons face, the utility of institution ethics consultations services for surgeons, and to identify what barriers, if

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any, discourage surgeons from utilizing these services. The results of this study can be used by medical professionals, hospitals, and bioethicists in several important ways. First, they will provide a better understanding the ethical dilemmas that surgeons face in their practices. Second, they will provide understanding of factors that determine the current utilization of hospital consultation services by surgeons Third, information collected on the barriers to surgeons' use of ethics consultation services will provide better insight into the perspective and culture of surgery as it relates to ethical dilemmas in their practices and how ethics consultation services could better support surgeons when faced with these dilemmas. Frequency of Response: One occasion. Affected Public: Individuals. Type of Respondents: Surgeons practicing in the US. The annual reporting burden is as follows: Estimated Number of Respondents: 3,156; Estimated Number of Responses per Respondent: 29 items per questionnaire; Average Burden Hours Per Response: 0.00862; and Estimated Total Annual Burden Hours Requested: 789. The annualized cost to respondents is estimated at: \$0. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

Type of Respondents	Estimated Number of Responden ts	Estimated Number of Responses per Respondent	Average Burden Hours Per Response	Estimated Total Annual Burden Hours Requested
Surgeons	3156	29	0.00862	789
Total				789

**REQUEST FOR COMMENTS:** Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's

estimate of the burden of the proposed collection of information, including the validity of the

methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the

information to be collected; and (4) Ways to minimize the burden of the collection of

information on those who are to respond, including the use of appropriate automated, electronic,

mechanical, or other technological collection techniques or other forms of information

technology.

**FOR FURTHER INFORMATION:** To request more information on the proposed project or to

obtain a copy of the data collection plans and instruments, contact Dr. Marion Danis at

Department of Clinical Bioethics, National Institutes of Health, Building 10, Room 1C118,

Bethesda, MD 20892-1156, Telephone: 301.435.8727, Facsimile: 301.496.0760, or Email your

request, including your address to: mdanis@cc.nih.gov

**COMMENTS DUE DATE:** Comments regarding this information collection are best assured of

having their full effect if received within 60-days of the date of this publication.

Dated: November 6, 2011

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National Institutes of Health

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